## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

**Application or Docket Number** 

10840056

| CLAIMS AS FILED - PART I         |  |   |                                       |                                    |             |                  |     | SMALL ENTITY   |                        |      | OTHER THAN         |                        |  |
|----------------------------------|--|---|---------------------------------------|------------------------------------|-------------|------------------|-----|----------------|------------------------|------|--------------------|------------------------|--|
| TOTAL CLAIMS                     |  |   | (Columi                               | וו ח                               | (Con        | ımn 2)           | 1   | YPE [          |                        | OR   | SMALL              |                        |  |
| TOTAL CLAIMS                     |  |   |                                       |                                    | <u> </u>    |                  |     | RATE           | FEE                    | 1    | RATE               | FEE                    |  |
| F                                | DR 5/15/   | 6   | NUMBER                                | FILED                              | NUME        | BER EXTRA        |     | BASIC FEE      | 150.00                 | OR   | BASIC FEE          | 300.00                 |  |
| TOTAL CHARGEABLE CLAIMS          |  |   | £8 mi                                 | nus 20=                            | • . (       | 26               |     | X\$ 25=        |                        | OR   | X\$50=             |                        |  |
| INDEPENDENT CLAIMS               |  |   | 2 minus 3 =                           |                                    |             | 2                |     | X100=          |                        | OR   | X200=              |                        |  |
| ML                               | JLTIPLE DEPEI  | NDENT CLAIM P                             | RESENT                                |                                    |             |                  |     | +180=          |                        | OR   | +360=              |                        |  |
| * 11                             | the difference   | e in column 1 is                          | less than zero, enter "0" in column 2 |                                    |             |                  | •   | TOTAL          | ·                      | OR   | TOTAL              |                        |  |
| CLAIMS AS AMENDED - PART II      |  |   |                                       |                                    |             |                  |     |                |                        |      | OTHER              | THAN                   |  |
| سحس                              |  | (Column 1)                                |                                       |                                    |             | (Column 3)       |     | SMALL          | ENTITY                 | OR   | SMALL              | ENTITY                 |  |
| AMENOMENT A                      |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | -                                     | - HIGH<br>NUME<br>PREVIO<br>PAID I | BER         | PRESENT<br>EXTRA |     | RATE           | ADDI-<br>TIONAL<br>FEE |      | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|                                  | Total  | •   | Minus                                 | **                                 |             | ء                |     | X\$ 25=        |                        | OR   | X\$50=             |                        |  |
|                                  | Independent  | •   | Minus                                 | ***                                |             | =                |     | X100=          |                        | OR   | X200=              |                        |  |
|                                  | FIRST PRESE  | ENTATION OF MI                            | ULTIPLE DE                            | PENDENT                            | CLAIM       |                  | ľ   | +180=          | ,                      | OR   | +360=              |                        |  |
|                                  |  |   |                                       |                                    |             |                  |     | TOTAL          |                        |      | TOTAL              |                        |  |
|                                  |  |   |                                       |                                    |             | • •              | A   | DDIT. FEE      |                        | OR   | ADDIT. FEE         |                        |  |
| _                                |  | (Column 1) CLAIMS                         | <del></del>                           | Colum                              |             | (Column 3)       | 1 – |                |                        |      |                    |                        |  |
| AMENDMENT B                      |  | REMAINING<br>AFTER<br>AMENDMENT           |                                       | NUME<br>PREVIO<br>PAID F           | BER<br>USLY | PRESENT<br>EXTRA |     | RATE           | ADDI-<br>TIONAL<br>FEE |      | RATE               | ADDI-<br>TIONAL<br>FEE |  |
| NDN                              | Total  |   | Minus                                 | **                                 |             | •                |     | X\$ 25=        | :                      | OR   | X\$50=             |                        |  |
| ME                               | Independent  | *   | Minus                                 | ***                                |             | =                |     | X100=          |                        | OR   | X200=              |                        |  |
|                                  | FIRST PRESE  | NTATION OF ML                             | <del> </del>                          | PENDENT                            | CLAIM       |                  | ╿┝  |                |                        |      |                    |                        |  |
|                                  |  |   |                                       |                                    |             |                  |     | +180=<br>TOTAL |                        | OR   | +360=              |                        |  |
|                                  |  |   |                                       |                                    |             |                  |     |                |                        | OR , | TOTAL<br>ODIT. FEE |                        |  |
| (Column 1) (Column 2) (Column 3) |  |   |                                       |                                    |             |                  |     |                |                        |      |                    |                        |  |
| AMENDMENT C                      |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHE<br>NUMB<br>PREVIO<br>PAID F  | ER<br>USLY  | PRESENT<br>EXTRA |     | RATE           | ADDI-<br>TIONAL<br>FEE |      | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|                                  | Total  | •   | Minus-                                | **                                 |             | 8                | ,   | X\$ 25=        |                        | OR   | X\$50≈             |                        |  |
|                                  | Independent  | <b>.</b>                                  | Minus                                 | ***                                |             | 2                |     | X100=          |                        | Ì    | X200=              |                        |  |
|                                  | FIRST PRESE  | NTATION OF MU                             | ILTIPLE DEF                           | PENDENT                            | CLAIM       |                  | -   |                |                        | OR   | 7200-              |                        |  |
|                                  | M  |   | +180=                                 |                                    | OR          | +360=            |     |                |                        |      |                    |                        |  |
| i[                               | If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  ADDIT. FEE  TOTAL A |   |                                       |                                    |             |                  |     |                |                        |      |                    |                        |  |